
Overview of BHDDH's New Service, New Rates and New Method for Authorizing Services

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Topics for this Presentation

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Clinical Validation Study

- 1,000 individuals selected initially for SIS assessment proportional to:
 - Residential status (group home, SLA, independent, with family)
 - Authorization levels
 - Distribution by providers delivering the services
- From the initial 1,000 assessments, 89 individuals were selected for the clinical validation study
 - All SIS levels represented
 - All residential statuses represented
 - All provider agencies represented (private agency clients only)

Clinical Validation Study

- Information request made to support coordination agencies for the sample cases selected
- Validation Study occurred June 25-28
- There were 4 Clinical Validation Teams which included:
 - External clinicians with experience serving DD clients
 - BHDDH and other state staff
 - Agency directors and support coordination staff
 - Advocates
- Each team reviewed 24 cases, some of which were reviewed by multiple teams as an inter-rater test

Clinical Validation Study

- Charge of the Clinical Validation teams was to answer:
 - Does the SIS level to which the individual has been assigned based on the SIS assessment align with that individual's clinical needs as evidenced in the case file?
 - Does the service package that the individual would receive based on their assigned SIS level meet their needs?

Clinical Validation Study

- Recommendations from the Clinical Validation Teams to BHDDH
 - Verify the Supplemental Questions- AGREE, in process
 - Review criteria for placement into SIS levels- AGREE, completed analysis, decision made not to change the criteria but instead to make some changes to the service packages
 - Consider combining levels into tiers, informed by utilization- AGREE, the 7 SIS levels are being grouped into 5 tiers
 - Consider changes to rate models, specifically:
 - Staffing ratios in Community Residence service- AGREE, changes made
 - Nursing ratio in Medical Community Residence service- AGREE, change made
 - Hours of Community-Based Supports for individuals living independently or with family- AGREE, changes made

Components of the Service Packages

- Internal BHDDH team met to develop proposed service packages to give to the Clinical Validation team
- BHDDH met regularly to review the Clinical Validation team recommendations as well as current utilization to make adjustments to the draft service packages
- Refer to the separate handout “Service Packages by Residential Status by Tier”

New Services

- **“Access to Overnight Shared Supports”** means the availability of direct support and assistance on an on-call basis for participants who live independently in the community in a setting where direct support can be easily shared among a group of participants, such as an apartment building. The service is intended to be shared among participants to help them achieve and/or maintain the outcomes of increased independence, productivity, and inclusion in the community, as outlined in his/her person-centered plan. Access to Overnight Shared Supports does not supplant nonpaid natural supports. This service is **ONLY** offered to participants who live independently in a residential setting not licensed by BHDDH where overnight supports are neither authorized nor funded”.
- **“Professional Services while at the Day Program”** = same definition as Community Based Supports- Professional Staff, but service packages will separately authorize for this service

Rate Changes and Regulatory Changes

- Rate Changes were made based on changes to staffing ratios
 - Community/Non Congregant Residence Supports, Level 2
 - Community/Non Congregant Residence Supports, Medical
 - Center-Based Day Program
 - Community-Based Day Program
- Changes to staffing ratios are also being incorporated into the regulations
- To simplify the billing process, many services have had 7 different rates based on 7 levels. Now that the 7 levels have been collapsed into five tiers, the services that had 7 rates are being reduced to 5 rates.

From Assessment to Service Delivery

- Refer to separate flow chart “From Assessment to Service Delivery” that walks through the process
- 90 days prior to the participant’s anniversary, they will be given a letter:
 - Notice of their service package
 - Information on the results of their SIS assessment will be given to their Support Coordinator and Social Caseworker via email (hard copy available upon request)
 - Rights for reconsideration
- Participants will have 45 days to complete an ISP and Purchase Order for BHDDH review
- If no ISP and PO is submitted timely, no new authorizations will be put in place at the anniversary date
- There is also a formal process for Major Life Changes. Refer to separate flow chart “Major Life Change”.

What Is Not Changing

- Participant choice in purchasing services
- Flexibility in using community resource allocation to purchase day program activities, employment-related services, or community-based services
- Changes in current residential status
- Quarterly authorizations process
- Billing process
- ISPs and Purchase Orders still required

Implementation Schedule

- Start with anniversaries in February 2013
- Additional participants will move to new service packages each month
- Some participants with Feb/Mar anniversaries have not yet been assessed; they will be last to move over to new system
- All new participants to the system will be assessed and assigned a new service package
- At any time, Major Life Changes may occur which could result in a change in service package

Opportunities for Reconsideration

- Participants and their families have multiple opportunities to communicate to BHDDH before an appeal should be considered:
 - SIS interview participants are asked to sign an attestation at the conclusion of the interview to ensure that they understood the process, the questions being asked, and they felt the interview had the right participants involved
 - Upon receiving notification of their service package, participants may request a reconsideration, but this must be accompanied by the BHDDH Request Form that must indicate the reason why it is perceived that the funded service package is insufficient
 - If a request for reconsideration is denied, a participant may seek an informal hearing at BHDDH with a hearing officer that is not in BHDDH's assessment or the fiscal office.
- Refer to the separate handout that is the flowchart "Opportunities for Reconsideration in the SIS Process".